

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATI N	<i>gaw</i>	75331	
O.I.R.E. CLASSIFIER		59	624
FORMALITY REVIEW	<i>100</i> <i>100</i>	71423 71423	7-15-99 8-24-99

INDEX OF CLAIMS

..... Rejected N ..... Non-elected  
 ..... Allowed I ..... Interference  
 (Through numeral).... Canceled A ..... Appeal  
 ..... Restricted O ..... Objected

Claim	Date
Final	
Original	
1	6/4/98
2	7/2/98
3	7/27/98
4	3/1/02
5	5/29/02
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Claim	Date
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Claim	Date
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